

PTO/SB/82 (06-03)

Approved for use through 11/30/2005. OMB 0651-0035

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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REVOCATION OF POWER OF ATTORNEY and APPOINTMENT OF NEW POWER OF ATTORNEY

Application Number	10/617,135
Filing Date	July 10, 2003
First Named Inventor	James E. Broberg
Group Art Unit	Not yet assigned
Examiner Name	Not yet assigned
Attorney Docket Number	V3.0106

I hereby revoke all previous powers of attorney given in the above-identified application:

☒ A Power of Attorney is submitted herewith.

OR

☐ I hereby appoint the practitioners at Customer Number: ☒ Please change the correspondence address for the above-identified application to:☐ The address associated with Customer Number:

OR

☒ Firm or Individual Name Mathew R. P. Perrone, Jr.

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I am the:

☒ Applicant/Inventor☐ Assignee of record of the entire interest. See 37 CFR 3.71
Statement under 37CFR 3.73(b) is enclosed (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Name James E. Broberg

Signature

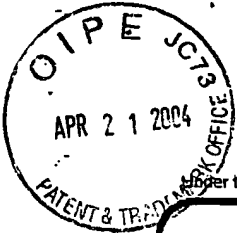
Date

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ Total of 2 forms are submitted.

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PTO/SB/81 (06-03)

Approved for use through 11/30/2005. OMB 0851-0035

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POWER OF ATTORNEY and CORRESPONDENCE ADDRESS INDICATION FORM

Application Number	10/617,135
Filing Date	July 10, 2003
First Named Inventor	James E. Broberg
Art Unit	Not yet assigned
Examiner Name	Not yet assigned
Attorney Docket Number	Y3.0106

I hereby appoint:

☐ Practitioners at Customer Number
OR

☒ Practitioner(s) named below:

Name	Registration Number
Mathew R. P. Perrone, Jr.	22,951

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please recognize or change the correspondence address for the above-identified application to:

☐ The above-mentioned Customer Number.

OR

☐ The address associated with Customer Number:

OR

<input checked="" type="checkbox"/> Firm or Individual Name	Mathew R. P. Perrone, Jr.				
Address	Attorney at Law				
Address	210 South Main Street				
City	Algonquin	State	Illinois	Zip	60102
Country	USA				
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I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

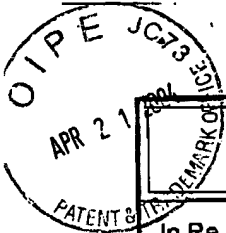
Name	James E. Broberg		
Signature			
Date		Telephone	847/526-2136

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple

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**Change Of Attorney Or Agent's Address In Application**
(37 CFR 1.8(a))

Docket No.

Y3.0106

In Re Application Of: **James E. Broberg**Serial No.
10/617,135Filing Date
July 10, 2003Examiner
Gabriel S. SukmanGroup Art Unit
3641Invention: **Dual Control Horn****TO THE COMMISSIONER FOR PATENTS**

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Dated: April 21, 2004

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I certify that this document is being deposited on
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*Signature of Person Mailing Correspondence***Mathew R. P. Perrone, Jr.***Typed or Printed Name of Person Mailing Correspondence*